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TITLE: Trends by Year of First Positive HIV Testing among Persons with HIV Disease in Rural/non-urban Alabama (AL) and Mississippi (MI)

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OBJECTIVES: The incidence of AIDS is higher in the South than in other areas of the country. We wanted to assess changing sociodemographic characteristics and risk behavior patterns to better understand the evolving public health problem.

METHODS: From 1995 to present we have been conducting comprehensive interviews of HIV-infected persons living in rural/small city AL and MS at multiple sites. We assessed trends in behaviors according to year the person first tested positive for HIV.

RESULTS: We interviewed 746 adults who reported having anal or vaginal intercourse during their putative period of infection: 537 men (72%) and 209 women (28%), of whom 51% and 30% was higher for whites than blacks (70% vs 35%, $p < 0.001$). The median year tested positive for HIV was 1993 (range 1980 to 1997). There were several significant trends ($p < 0.05$) with year first tested positive for HIV: increases over time in the proportions of MSM, blacks, the less educated, those who reported a prior negative HIV test, and those reporting "usual use" of condoms; decreases in the proportion reporting injection drug use (IDU). The average age when tested positive increased with year tested positive overall and within each sexual preference group. This was strongest among heterosexual men whose average age when tested positive increased from 28 to 38 years of age for before 1990 to after 1996, respectively. The trend with increasing condom use was present among MSM and women, but not heterosexual men. The trend with decreasing IDU was present among both heterosexual men and women, but not MSM. However, IDU overall was less common among MSM (9% vs 14%, $p = 0.02$). The inverse association of age with year testing positive for HIV was present among MSM and women. There were no trends regarding number of sexual partners, crack use, or trading sex for money or drugs.

CONSLUSIONS: High-risk practices among persons acquiring HIV, such as sex without condoms and IDU, have decreased. Prevention efforts should continue with a focus on heterosexuals, particularly crack use with the concomitant high number of sexual partners and on condom use among heterosexual males.

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